

**CITY OF GREENVILLE
CORPORATE
PARKING ASSIGNMENT SHEET
CHURCH ST. PARKING GARAGE**

NAME _____
(PLEASE PRINT OR TYPE)

CORPORATE NAME _____
(PLEASE PRINT OR TYPE)

HOME ADDRESS _____
(NUMBER AND STREET)

CORPORATE ADDRESS _____
(NUMBER AND STREET)

CITY _____ STATE _____ ZIP _____
HOME PHONE _____

CITY _____ STATE _____ ZIP _____
CORPORATE PHONE _____

The parking fee is **\$0.00** per month, and should be paid in advance of the first day of each month. If the fee is not paid by the 10th of the month, the AVI tag will be disabled and there will be a **\$0.00** per AVI tag reinstatement fee added until your account is paid in full. Once the AVI tag is disabled the daily parking charge must be paid in order to exit the facility and will not be applied towards your balance or refunded.

Once the AVI tag is issued it will allow you to park at this facility only. The AVI tag is to be used by **you only, NO EXCEPTIONS**. Unauthorized use of the avi tag by other persons will result in permanent cancellation of monthly parking privileges at all city parking facilities.

There is a **\$0.00** per AVI tag deposit due, in advance and refundable, without interest, upon surrender of your valid AVI tag. (The deposit will be returned in full provided that all monthly charges are paid in full and the AVI tag is returned to the City no later than the 5th day of the month. If tag is not returned by the 5th day of the month, you will owe for that month.)

Loss of a valid monthly AVI tag results in a replacement fee of **\$50.00** per AVI tag.

NO REFUNDS shall be given for parking fees.

The monthly AVI tag is valid only for regular business hours as determined by the City. This applies to all rented spaces. Regular business hours are defined as Monday through Friday, 7:00 a.m. to 6:00 p.m. This includes reserved parking spaces. **Monthly parkers entering the garage without their AVI tag will be required to pay the prevailing daily rate as well as all special event rates except during regular business hours.**

The City of Greenville reserves the right to cancel this agreement, at its discretion, given a thirty (30) day written notice.

The City reserves the right to increase parking fees after giving a thirty (30) day written notice.

Make checks payable to "**CITY OF GREENVILLE**", please put Card number and facility name on your check and mail to City of Greenville, Parking Services Division, P.O. Box 2207, Greenville, SC 29602.

The City shall not be responsible for loss, damage to property or personal injury as a result of parking at the above location. The undersigned relieves the City from any and all claims which they may have.

Any vehicle left in this parking building longer than 72 hours (3 days) without notifying the Parking Division, is subject to being towed at the owner's expense at the discretion of the Greenville Police Department.

SMOKING IS PROHIBITED, BY CITY ORDINANCE, IN STAIRWELLS AND ELEVATORS AT ALL TIMES.

Primary vehicle information:

Secondary vehicle information:

Year _____ Make/Model: _____ Year _____ Make/Model _____

State: _____ Tag# _____ State: _____ Tag # _____

Color: _____ Color: _____

I have read and understand the above application and agree to abide by all rules and regulations of said application.

SIGNATURE OF APPLICANT

DATE

NOTIFY THE PARKING DIVISION AT 467-4900, WHEN ANY CHANGES IN VEHICLE(S) OR ADDRESS INFORMATION OCCURS.

OFFICE USE ONLY:

Date Issued: _____ **AVI Tag #** _____ **Issued By:** _____

Revised November 7, 200